Case 5:23-cv-11074-JEL-EAS ECF No. 1-20, PageID.85 Filed 05/05/23 Pages/2028 97:34 PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Libertarian Party of Michigan Executive Committee, Inc. P.O. Box 614 ADDRESS (number and street) (Check if address is changed) Royal Oak 48068 MΙ CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS angelat0763@gmail.com (Check if address is changed) Optional Second E-Mail Address swmi4liberty@be-innovative.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.michiganlp.net (Check if address is changed) DATE 02 05 2023 C00403907 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Thorton, Angela, , , Type or Print Name of Treasurer Thorton, Angela, , , [Electronically Filed] Date 2023 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100 EXHIBIT 11

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FEC	Form	1 (Revised 03/2022) Page 2				
. Т	YPE C	DF COMMITTEE:				
(	Candio	andidate Committee:				
(	a)	This committee is a principal campaign committee. (Complete the candidate information below.)	is committee is a principal campaign committee. (Complete the candidate information below.)			
(	b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	Name Candi					
	Candio Party	date Office Sought: House Senate President District	-			
(	c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
		ne of didate				
F	Party (	Committee:				
	d) <b>x</b>	This committee is a STA (National, State or subordinate) committee of the LIB (Democratic, Republican, etc.) Party				
F	Politica	al Action Committee (PAC):				
(	e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	is a:			
		Corporation Corporation w/o Capital Stock Labor Organization				
		Membership Organization Trade Association Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.				
(1	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
(	g)	This committee is an independent expenditure-only political committee (Super PAC).				
		In addition, this committee is a Lobbyist/Registrant PAC.				
(	h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).				
	In addition, this committee is a Lobbyist/Registrant PAC.					
_ .j	loint F	Fundraising Representative:				
(i		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.				
(	j)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Com	nmittees Participating in Joint Fundraiser				
	1.	C				
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	FEC <b>Form 1</b> (Re	evised 02/2009)	Page <b>3</b>		
	Vrite or Type Committee	· · · · · · · · · · · · · · · · · · ·	r aye <b>y</b>		
		Party of Michigan Executive Committee, Ir	nc		
6.		cted Organization, Affiliated Committee, Joint Fundraising Representative, o			
	Mailing Address				
			1 11		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Cor	nnected Organization Affiliated Organization Joint Fundraising Representation	ive Leadership PAC Sponso		
7.	Custodian of Records books and records.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.			
	Tho	orton, Angela, , ,			
	Full Name				
	Mailing Address	15223 Ripple Dr.			
		Linden	48451		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	17		
8.		ame and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	and the name and address of		
	Full Name Tho	orton, Angela, , ,			
	of Treasurer				
	Mailing Address	15223 Ripple Dr.			
		Linden	48451		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	Treasurer	Telephone number	17 - 375 - 9924		

FEC Form 1 (Revised 02/2009)  Full Name of Designated Agent Mailing Address  Potage Po					
Designated Agent Agent  Mailing Address  2763 Chestnut Ridge Ave.  CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number	FEC Form	1 (Revised 02/2009)	Page <b>4</b>		
Agent Mailing Address    Portage		Brandenburg, Jason, F, ,			
Portage  CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number					
CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number	Mailing Address	2763 Chestnut Ridge Ave.			
CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number					
Title or Position   Telephone number		Portage	MI   49024 		
Title or Position   Telephone number		CITY ▲ STA	ATE ▲ ZIP CODE ▲		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Comerica Bank  PO Box 75000  Detroit  Detroit  STATE A ZIP CODE A  Name of Bank, Depository, etc.	Title or Position				
Name of Bank, Depository, etc.  Comerica Bank  Mailing Address  PO Box 75000  Detroit  CITY ▲  STATE ▲  ZIP CODE ▲  Mailing Address		Telephone number	586 - 491 - 8853		
Name of Bank, Depository, etc.  Comerica Bank  Mailing Address  PO Box 75000  Detroit  CITY ▲  STATE ▲  ZIP CODE ▲  Mailing Address					
Comerica Bank  PO Box 75000  Detroit  CITY A  STATE A  ZIP CODE A  Name of Bank, Depository, etc.			eposits funds, holds accounts, rents		
Mailing Address  PO Box 75000  Detroit  CITY A STATE A ZIP CODE A  Name of Bank, Depository, etc.  Mailing Address	Name of Bank,	Depository, etc.			
Detroit  CITY ▲  STATE ▲  ZIP CODE ▲  Name of Bank, Depository, etc.		Comerica Bank			
CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Mailing Address	Mailing Address	PO Box 75000			
CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Mailing Address					
Name of Bank, Depository, etc.  Mailing Address		Detroit	MI   48275 		
Mailing Address  Line in the second of the s		CITY ▲ STA	TE ▲ ZIP CODE ▲		
	Name of Bank, Depository, etc.				
CITY ▲ STATE ▲ ZIP CODE ▲	Mailing Address				
CITY ▲ STATE ▲ ZIP CODE ▲					
CITY ▲ STATE ▲ ZIP CODE ▲					
		CITY ▲ STA	TE ▲ ZIP CODE ▲		

Office Use Only

Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

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FEC	Form	1 (Revised 03/2022) Page 2					
. 7	TYPE C	OF COMMITTEE:					
(	Candio	andidate Committee:					
(	a)	This committee is a principal campaign committee. (Complete the candidate information below.)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(	b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name Candi	l., ., ., ., .	_				
	Candio Party	date Office State Affiliation Sought: House Senate President District					
(	c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	Τ				
	Nam Can	ne of didate					
F	Party (	Committee:					
	d) <b>x</b>	This committee is a STA (National, State or subordinate) committee of the LIB (Democratic, Republican, etc.) Party					
F	Politica	al Action Committee (PAC):					
(	e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is	a:				
		Corporation Corporation w/o Capital Stock Labor Organization					
		Membership Organization Trade Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
(	f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
(	g)	This committee is an independent expenditure-only political committee (Super PAC).					
		In addition, this committee is a Lobbyist/Registrant PAC.					
(	h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.						
_	Joint F	undraising Representative:	_				
	i) [	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(	j) 🔲	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Com	mittees Participating in Joint Fundraiser					
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	FEC <b>Form 1</b> (Revise	sed 02/2009)	Page <b>3</b>
٧	Vrite or Type Committee Na	•	r aye •
		Party of Michigan Executive Committee	Inc
6.		ed Organization, Affiliated Committee, Joint Fundraising Representative	
	Mailing Address		
		CITY ▲ STATE	ZIP CODE ▲
	Relationship: Connec	ected Organization Affiliated Organization Joint Fundraising Represe	
7.	Custodian of Records: le	dentify by name, address (phone number optional) and position of the per	rson in possession of committee
	Thornt	ton, Angela, , ,	
	Full Name		
	Mailing Address	15223 Ripple Dr.	
		Linden	48451
		CITY ▲ STATE	▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	810 - 458 - 4698
8.	Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committel.g., assistant treasurer).	tee; and the name and address of
	Full Name Thornt	ton, Angela, , ,	
	of Treasurer		
	Mailing Address	15223 Ripple Dr.	
		Linden	48451
		CITY ▲ STATE	▲ ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	810 - 458 - 4698

FEC Form	1 (Revised 02/2009)		Page <b>4</b>
Full Name of Designated	Brandenburg, Jason, F, ,		
Agent			
Mailing Address	2763 Chestnut Ridge Ave.		
	Portage	MI	49024
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position	▼		
	Telephone	e number 586	8853
. Banks or Other safety deposit be	<b>Depositories:</b> List all banks or other depositories in which the corpxes or maintains funds.	nmittee deposits fur	nds, holds accounts, rents
Name of Bank,	Depository, etc.		
	Comerica Bank		
Mailing Address	411 W Lafayette Blvd		
	Detroit	MI	48226
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository, etc.			
	T		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment is to correct the spelling of the Treasurer and correct the bank address.

Form/Schedule: Transaction ID: